#### FORM D

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.



UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

## FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

1672361
OMB APPROVAL
OMB Number: 3235-0076
Expires: May 31, 2002
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Preti.
Preti. 03-33-310

Name of Offering ([] check if this is an amendment and name has changed, and indicate change.)								
GREEN FUSION CORPORA	ΓΙΟΝ, Issuance of Units							
Filing Under (Check box(es) that apply): [] Rule 504 [] Rule 505 [x] Rule 506 [] Section 4(6) [] ULOE								
Type of Filing: [X] New Filing [] Amendment								
	A. BASIC IDENTIFICATION DATA							
1. Enter the information requested a	bout the issuer							
Name of Issuer ([] check if this	is an amendment and name has changed, and indicate change.)							
GREEN FUSION CORPORA	TION AND AND AND AND AND AND AND AND AND AN							
Address of Executive Offices (Num	iber and Street, City, State, Zip Code)  Telephone Number (Including Area-Code)							
750 Terminal Avenue, Suite 20	8, Vancouver, BC, Canada V6A 2M5 (604) 484-4940							
Address of Principal Business Opera	ttions (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)							
(if different from Executive Offices)	South a first and the second of the second o							
	8, Vancouver, BC, Canada V6A 2M5 (604) 484-4940							
Brief Description of Business								
Food Manufacturing and Reta	iling VA 184 /EE							
Type of Business Organization								
[X] corporation	[ ] limited partnership, already formed [ ] other (please specify):							
[ ] business trust	[] limited partnership, to be formed							
Month Year								
Actual or Estimated Date of Incorpo								
	anization: (Enter two-letter U.S. Postal Service abbreviation							
for State: CN for Canada: FN for ot	her foreign illrisdiction							

### **GENERAL INSTRUCTIONS**

### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

## ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA
2. Enter the information requested for the following:
<ul> <li>Each promoter of the issuer, if the issuer has been organized within the past five years;</li> </ul>
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of
equity securities of the issuer;
<ul> <li>Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership</li> </ul>
issuers; and
Each general and managing partner of partnership issuers.
Check Box(es) that Apply: [ ] Promoter [ ] Beneficial Owner [X] Executive Officer [X] Director [ ] General/Managing Partner
Full Name (Last name first, if individual)
BAERGEN, L. EVAN
Business or Residence Address (Number and Street, City, State, Zip Code)
750 Terminal Avenue, Suite 208, Vancouver, BC, Canada V6A 2M5
Check Box(es) that Apply: [ ] Promoter [X] Beneficial Owner [ ] Executive Officer [ ] Director [ ] General/Managing Partner
Full Name (Last name first, if individual)
SIEMENS, RICHARD
Business or Residence Address (Number and Street, City, State, Zip Code)
c/o 3100 Vancouver Centre, PO Box 11504, 650 West Georgia Street, Vancouver, BC, Canada V6B 4P7
to 5100 vancouver Centre, 10 Dox 11304, 030 West Georgia Street, vancouver, De, Canada vob 417
Check Box(es) that Apply: [ ] Promoter [X] Beneficial Owner [ ] Executive Officer [ ] Director [ ] General/Managing Partner
Full Name (Last name first, if individual)
SIEMENS INDUSTRIES LTD.
Business or Residence Address (Number and Street, City, State, Zip Code)
c/o 3100 Vancouver Centre, PO Box 11504, 650 West Georgia Street, Vancouver, BC, Canada V6B 4P7
Check Box(es) that Apply: [ ] Promoter [X] Beneficial Owner [ ] Executive Officer [ ] Director [ ] General/Managing Partner
Full Name (Last name first, if individual)
CHUN SIU FUN
Business or Residence Address (Number and Street, City, State, Zip Code)
Unit 26/F, CNT Tower, 338 Hennessy Road, Hong Kong
Check Box(es) that Apply: [ ] Promoter [X] Beneficial Owner [ ] Executive Officer [ ] Director [ ] General/Managing Partner
Full Name (Last name first, if individual)
HONG KONG BASE LIMITED
Business or Residence Address (Number and Street, City, State, Zip Code)
Unit 26/F, CNT Tower, 338 Hennessy Road, Hong Kong
Check Box(es) that Apply: [ ] Promoter [ ] Beneficial Owner [ ] Executive Officer [ ] Director [ ] General/Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
business of Residence Address (Admicel and Street, Stry, State, 21p Sode)
Check Box(es) that Apply: [ ] Promoter [ ] Beneficial Owner [ ] Executive Officer [ ] Director [ ] General/Managing Partner
Full Name (Last name first, if individual)
. Full Pathle (East hathe first, if individual)
Ducinass on Decidence Address Alumber and Street City State 7in Code
Business or Residence Address (Number and Street, City, State, Zip Code)
Charle Daylor) that Apply [ ] Daylor [ ] Day Said Owner [ ] Francis Office [ ] Division [ ] Consultation [ ] Particular [ ] Pa
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [] Director [] General/Managing Partner
Full Name (Last name first, if individual)
D D 11 01 10
Business or Residence Address (Number and Street, City, State, Zip Code)
(Use blank sheet, or copy and use additional copies of this sheet as necessary)

					ORMAT							
1. Has the	e issuer sol	ld, or does	the issuer i	ntend to se							Yes	No
2. What i	s the minir	num invest	tment that v	vill be acce						under ULOE		[X] N/A.
2.5		•, • •			1 ::0	•					Yes	No
3. Does to	he offering	permit joi	nt ownersh	p of a sing	gle unit?	heen or w	ill he naid	or given	directly or	indirectly,	any comp	[X]
										g. If a person		
										ne name of the		
	nan nve (: dealer onl		to be listed	are assoc	nated perso	ons of such	a broker	or dealer, y	ou may se	t forth the in	niormatio	n for tha
Full Nam	e (Last nar		individual)									
위/ Business	<u>,                                      </u>	ice Addres	s (Number	and Street,	City, State	, Zip Code	·)					<del> </del>
Name of	Associated	l Broker or	Dealer		·				<del></del>			
States in [AL]	Which Per [AK]	son Listed [AZ]	Has Solicit [AR]	ed or Inter [CA]	nds to Solic [CO]	it Purchase [CT]	ers (Check [DE]		or check [FL]	individual S	tates) ~ A [HI]	ll States [ID]
		[IA]	[KS]	[KY]		_		[DC]	[MI]	[GA] [MN]		
[IL] [MT]	[IN] [NE]	[NV]	[NH]	[NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[OH]	[OK]	[MS] [OR]	[MO] [PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
			individual)	[]	[0+]	[, ]	[ , , , , ]	[,,,,	[,,,,]	[ 17 - 1	[]	
Business	or Resider	ice Addres	s (Number	and Street,	City, State	, Zip Code	:)					
Name of	Associated	Broker or	Dealer									
							•			individual S		
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI] Full Nam	[SC]	[SD]	[TN] individual)	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
I dii i vaii	ie (East na	1110 11101, 11	a. v radaut)									
Business	or Resider	ice Addres	s (Number	and Street,	City, State	, Zip Code	·)					
Name of	Associated	l Broker or	Dealer									
States in	Which Per	son Listed	Has Solicit	ed or Inter	nds to Solic	it Purchase	ers (Check	"All States	or check	individual S	tates) ~ A	Il States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
rull Nam	ie (Last nai	me first, if	individual)									
Business	or Resider	nce Addres	s (Number	and Street,	City, State	, Zip Code	)					
Na C	A	I Ductor	Declar									
Name of	Associated	Broker or	Dealer									
States in	Which Per	son Listed	Has Solicit	ed or Inter	nds to Solic	it Purchase	ers (Check	"All States	or check	individual S	tates) ~ A	Il States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet as necessary)

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the		
total amount already sold. Enter "0" if answer is "none" or "zero." If th transaction is an exchange offering, check this box " and indicate in the column		
below the amounts of the securities offered for exchange and already exchanged		Amount
Type of Security	Offering Price	Already Sold
Debt		\$0
Equity		\$0
[] Common [] Preferred	···· <u>\$</u> 0	30
Convertible Securities (including warrants)	\$0	\$0
Partnership Interests	<del></del>	\$0
•		
Other (Specify UNITS, comprising one share of common stock, and one		\$173,963
share purchase warrant		<u> </u>
	\$0	_\$0
Answer also in Appendix, Column 3, if filing under ULOE.		
2. Enter the number of accredited and non-accredited investors who hav	Α.	
purchased securities in this offering and the aggregate dollar amounts of their		
purchases. For offerings under Rule 504, indicate the number of persons wh		Aggregate
have purchased securities and the aggregate dollar amount of their purchases o		Dollar Amount
the total lines. Enter "0" if answer is "none" or "zero."	Investors	of Purchases
Accredited Investors	1	\$173,963
Non-accredited Investors	NIL	\$ NIL
Total (for filings under Rule 504 only)		\$ N/A
Answer also in Appendix, Column 4, if filing under ULOE.		
3. If this filing is for an offering under Rule 504 or 505, enter the informatio requested for all securities sold by the issuer, to date, in offerings of the type indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1. Type of offering	es	Dollar Amount Sold
Rule 505		\$ N/A
Regulation A	N/A	\$ N/A
Rule 504		\$ N/A
Total		\$ N/A
4. a. Furnish a statement of all expenses in connection with the issuance an distribution of the securities in this offering. Exclude amounts relating solely t organization expenses of the issuer. The information may be given as subject t future contingencies. If the amount of an expenditure is not known, furnish a estimate and check the box to the left of the estimate.	o o	
Transfer Agent's Fees	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	[] \$0
Printing and Engraving Costs		[] \$0
Legal Fees		[X] \$2,000
Accounting Fees		[] \$0
•		
Engineering Fees		[] \$0
Sales Commissions (plus warrants)		[X] \$0
Other Expenses (identify): State Filing Fees		[X] \$150
Total		[X] <u>\$2,150</u>

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS									
	b. Enter the difference between the aggregate					·				
	response to Part C - Question 1 and total expenses fu	rnished in response to Part								
	C - Question 4.a.					\$171,813				
						4171,015				
	Indicate below the amount of the adjusted gross proce									
	proposed to be used for each of the purposes shown. I			Payments to						
	purpose is not known, furnish an estimate and check the			Officers,		<b>n</b>				
	estimate. The total of the payments listed must equal to to the issuer set forth in response to Part C - Question			Directors, & Affiliates		Payments to Others				
	Salaries and fees		f ]	\$0	[]	\$0				
	Purchase of real estate			\$0	_ [ ] _	\$0				
	Purchase, rental or leasing and installation of made				_ ' '					
	and equipment		[]	\$0	[]	\$0				
	Construction or leasing of plant buildings and fac-	cilities	[]	\$0	_ [ ]	\$0				
	Acquisition of other businesses (including the v				_					
	in this offering that may be used in exchange for			<b>#</b> 0		Φ.Δ.				
	another issuer pursuant to a merger) Repayment of indebtedness			\$0	_ [ ]	\$0				
	Working capital			\$0 \$0	$-\frac{[X]}{[\ ]}$	\$171,813 \$0				
	Other (specify):		[]	\$0	_ [ ]	\$0				
	Column Totals		[]	\$0	- [X]	\$171,813				
	Total Payments Listed (column totals adde		LJ	[X] \$17		Ψ171,015				
		(2)		(1-1) <u></u>	.,010	<del>-</del>				
	D. FE	DERAL SIGNATURE								
The	issuer has duly caused this notice to be signed	ov the undersigned duly a	uthori	zed person. If	this notic	e is filed under				
	e 505, the following signature constitutes an une									
Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor										
pursuant to paragraph (b)(2) of Rule 502.										
Issu	ner (Print or Type)	Signature		1	Date					
GR	EEN FUSION CORPORATION				May	y 31, 2002				
						, 61, 2002				
Nar	ne of Signer (Print or Type)	Title of Signer (Print or	Type)							
١.,	CNANDAED CEN	DDECEDENCE								
<u>L., .</u>	EVAN BAERGEN	PRESIDENT								
	•									
	ATTENTION  Intentional misstatements or omissions of fact constitute federal criminal violations									
	Intentional misstatements or omissions of fact constitute federal criminal violations.  (See 18 U.S.C. 1001.)									

### E. STATE SIGNATURE

- 1. Is any party described in 17 CFR 230.252(c), (d), (e) or (f) presently subject to any of the disqualification provisions of such rule?

  See Appendix, Column 5, for state response

  Yes No [ ] [X]
- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239,500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly signed person.

Issuer (Print or Type)	Signature	Date
GREEN FUSION CORPORATION		May 31, 2002
Name of Signer (Print or Type)	Title of Signer (Print or Type)	
L. EVAN BAERGEN	PRESIDENT	

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

# APPENDIX

		2	3			4		1	5
1		<u> </u>	3		•	•			ification
			Type of security						
1	Intend	to sell to	and aggregate						
		credited	offering price		Type of in	vestor and		explan	, attach ation of
		s in State	offered in state		Amount purchases in State				
	(Part B	-Item 1)	(Part C-Item 1)		(Part C-Item 2)				granted) -Item 1)
						Number of			
			Common Stock	Number of		Non-			
			& Warrant	Accredited		Accredited		-	
State	Yes	No		Investors	Amount	Investors	Amount	Yes	No
AL									
AK			·						
AZ									
AR									
CA		X	Units,	1	\$173,963	NIL	NIL		X
			comprised of						
			one share of						
}		ł	common stock						
			and one share						Ì
			purchase						
СО			warrant		<del> </del>				
CT							<del> </del>		
DE					+		<del>                                     </del>		
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## APPENDIX

1	2	3	4	5	
		Trans of accomites		Disqualification under State ULOE	
	Intend to sell to	Type of security and aggregate		(if yes, attach	
1	non-accredited	offering price	Type of investor and	explanation of	
	investors in State	offered in state	Amount purchases in State	waiver granted)	
	(Part B-Item 1)	(Part C-Item 1)	(Part C-Item 2)	(Part E-Item 1)	
TX					
UT					
VT					
VA					
WA					
WW					
WI					
WY					
PR					

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